

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09715878

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|---------------|--------------|
| TOTAL CLAIMS | 17 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 17 minus 20 = | |
| INDEPENDENT CLAIMS | 3 minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 355.00 |
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL | 355 |

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 710.00 |
| X\$18= | |
| X80= | |
| +270= | |
| TOTAL | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | • 17 | Minus •• 20 | = 0 |
| Independent | • 3 | Minus ••• 3 | = 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

| RATE | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL | |
| ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------|----------------|
| X\$18= | |
| X80= | |
| +270= | |
| TOTAL | |
| ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | • 20 | Minus •• 20 | = |
| Independent | • 3 | Minus ••• 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL | |
| ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------|----------------|
| X\$18= | |
| X80= | |
| +270= | |
| TOTAL | |
| ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | • | Minus •• | = |
| Independent | • | Minus ••• | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL | |
| ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------|----------------|
| X\$18= | |
| X80= | |
| +270= | |
| TOTAL | |
| ADDIT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | |
|------------------------------|--------------------------------|
| In Re Application of: | Patrick Rivelli Jr. |
| Application No.: | 09/715878 |
| Filed: | November 17, 2000 |
| For: | Neurovascular Stent and Method |
| Examiner: | Uyen T. Ho |
| Group Art Unit: | 3731 |

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

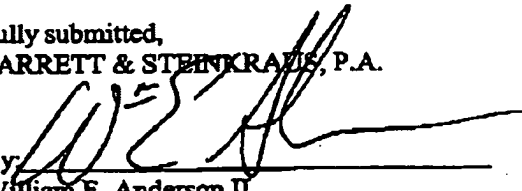
Docket No: S63.2P-10978-US02

PETITION FOR AN EXTENSION OF TIME UNDER 37 CFR §1.136

Petitioners, Scimed Life Systems, Inc., hereby request a two month extension of time to respond to the Office Action mailed February 24, 2004. Please charge the 2 month extension fee of \$420.00 to our Deposit Account, No. 22-0350.

Respectfully submitted,
VIDAS, ARRETT & STEINKRAUS, P.A.

Date: July 2, 2004

By: 
William E. Anderson II
Attorney Reg. No. 37766

08/02/2004 BDRDOKS 00000002 220350 09/715878
01 FC:2252 205.00 DA

Suite 2000
6109 Blue Circle Drive
Minnetonka, Minnesota 55343-9185
Telephone No: (952) 563-3000
Facsimile No: (952) 563-3001